

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

IA ETHICS AND
CAMPAIGN DISCLOSURE BOARD

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

MAY 12 PM 4:28

COMMITTEE NAME (Must be same as on Statement of Organization)

Brenda Johnson for Auditor

IMPORTANT: Indicate by # type of committee you are reporting for: 5

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Brenda Johnson

Political Party (if applicable)

Democrat

Office Sought

Davis County Auditor

District (If Senate or House)

**FORM
DR-2**

(Rev. 07/2007)

**DISCLOSURE
REPORT**

For Office Use Only

Comm. # _____
Logged in _____
Scanned _____
Computer _____
Audited _____

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Michael Johnson

641-664-3418

5/12/08

SIGNATURE OF PERSON FILING REPORT

TELEPHONE

DATE SIGNED

I AM FILING A 5/12/08 REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.
(report date) Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 225⁶⁴/₁₀₀ - 0 -

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$ 1250⁰⁰

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

Schedule F: Loan Repayments total (Attach Schedule F)

\$ 1024³⁶/₁₀₀

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$ 225⁶⁴/₁₀₀

**UNPAID BILLS (From Schedule D - Attach Schedule D)

0

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

25⁰⁰/₁₀₀

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

0

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO ☐

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

0

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Brenda Johnson for Auditor

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
3/27/08	ID# - CK# 1501	Stampede Graphics 212 E Jefferson St. Bloomfield Iowa 52537	Yard Signs	\$ 262 ⁶⁹ / ₁₀₀
3/28/08	ID# - CK# 1502	Tri-County Shopper P.O. Box 168 Bloomfield Iowa 52537	Newspaper Ad.	\$ 31. ⁵⁰ / ₁₀₀
4/3/08	ID# - CK# 1503	Stampede Graphics 212 E Jefferson St. Bloomfield Iowa 52537	3 1/2 by 4 ft Sign material	\$ 53 ⁵⁰ / ₁₀₀
4/4/08	ID# - CK# 1504	Stampede Graphics 212 E Jefferson St. Bloomfield Iowa 52537	4 Dress shirts for family picture for Brenda campaign ad.	\$ 69 ⁸⁵ / ₁₀₀
5/5/08	ID# - CK# 1505	Candid Photography 11765 Bunch Rd Drakesville Iowa 52555	Photo for Campaign Ad for paper	\$ 53 ⁵⁰ / ₁₀₀
5/09/08	ID# - CK# 1506	Bloomfield Cam m Inc P.O. Box 19 Bloomfield Iowa 52537	Adv Ad for paper	\$ 335 ¹⁰ / ₁₀₀
5/09/08	ID# - CK# 1507	Tri-County Shopper P.O. Box 168 Bloomfield Iowa 52537	Adv Ad for other paper	\$ 212 ⁶³ / ₁₀₀
5/12/08	ID# - CK# 1508	Copy Cupp n Keyboard 162 S Washington St. Bloomfield Iowa 52537	Adv flyers	\$ 5 ⁸⁹ / ₁₀₀
SUB-TOTAL				\$ 1024 ³⁶ / ₁₀₀
TOTAL (if last page of this schedule)				\$ 1024 ³⁶ / ₁₀₀

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(f).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Brenda Johnson for Auditor

SCHEDULE

F

(Rev. 02/08)

LOANS
RECEIVED
& REPAY☐ CHECK THIS BOX IF
AMENDING FORM

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 0

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable)	AMOUNT OF LOAN
3/27/08	Mike + Brenda Johnson 305 S. East St. Bloomfield, Iowa 52537	Husband + candidate	\$ 750 ⁰⁰
5/2/08	Mike + Brenda Johnson 305 S. East St. Bloomfield, Iowa 52537	Husband + candidate	\$ 500 ⁰⁰

TOTAL (PART I)

\$ 1250⁰⁰

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD

(Loans forgiven must be reported on Schedule E - In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAY
			\$

TOTAL CASH REPAYMENTS (PART II)

\$ 0

From Schedule E - TOTAL LOANS FORGIVEN

\$ 0

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD

\$ 1250⁰⁰

*Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.

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(for Schedule F)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Brenda Johnson for Auditor

SCHEDULE

E

(Rev. 06/97)

IN-KIND

CONTRIBUTIONS

☐ CHECK THIS BOX IF
AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
4/2/08	Doy E Johnson 27579 Silver Trail Floris, Iowa 52560	Father-in-law	32 by 47 Bays 1 pt of Point 2 metal Post	25 ⁰⁰	<input checked="" type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
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					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL

\$ 25⁰⁰TOTAL (if last
page of this
schedule)\$ 25⁰⁰

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule E)